

FAA SAFETY MANAGEMENT INFORMATION SYSTEM



Senior Management Overview

Purpose of SMIS

- Report work-related injury or illness, property damage, motor vehicle & fire (mishaps) online using the 3900-6 form.

<http://www.aee.faa.gov/aee-200/ch5.PDF>

<http://www.aee.faa.gov/aee-200/ch7.PDF>

How will the FAA benefit by the collection of 3900-6 data?

- SMIS provides a *central location* to document and track mishaps, with ready access to the information for authorized users.
- Data from this new system will:
 - ◆ Improve collection of statistical information of occupational injuries.
 - ◆ Improve ability to determine how, when, where and why injuries occur.
 - ◆ Help to mitigate hazards.
 - ◆ Help safety managers reduce injuries, resulting in a safer work place.
 - ◆ Help to prioritize employee mishap prevention efforts.
 - ◆ Help users maintain local OSHA 300 injury logs.

How do I access the site?

- Go to <http://smis.faa.gov>
- You can access SMIS through the **intranet** only.
- You need a User ID and a password
- Computer software requirements:
 - ◆ Adobe Acrobat Reader version 4.0 or higher. (Note: Adobe Reader is available for download on SMIS homepage.)
 - ◆ Microsoft Excel 2000 or higher.
 - ◆ Microsoft Internet Explorer (IE5 and up)

Enter your User ID and Password

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: Links : Forms : Support

Authorization

UserName
 This is case sensitive

Password

Login

Logging into the SMIS subjects you to FAA security regulations. Click [here](#) to read more about these regulations. If you forgot your User ID or Password, please contact the System Administrator.

Information

Welcome to the Safety Management Information System

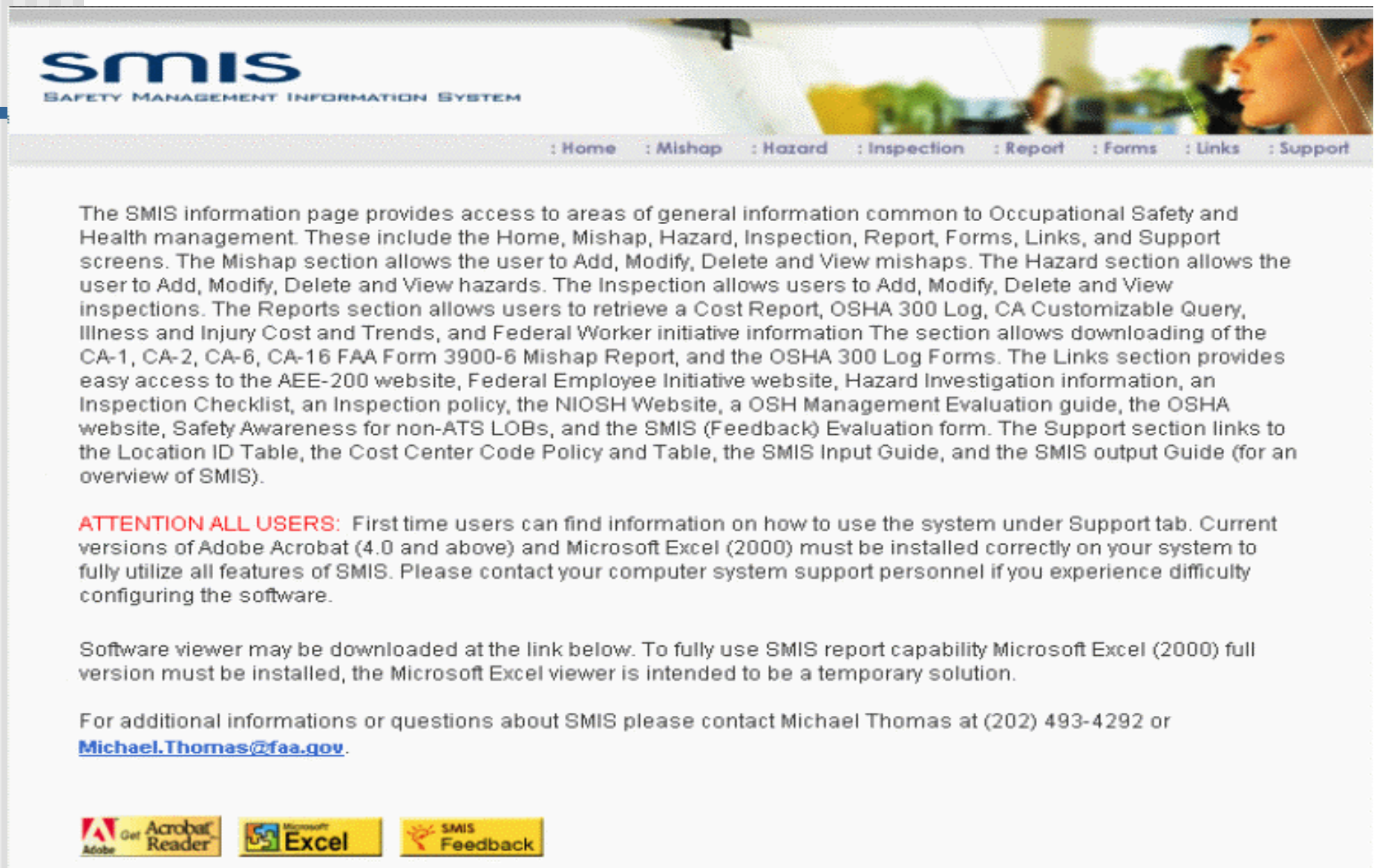
1. **UserName** = First letter of your first name and your entire last name. (John Doe)
2. **Password** = Last 6 numbers of your SSN. (SSN 123-45-6789) or call 202-493-4292

Microsoft Internet Explorer™ (IE5 and up).

FIRST TIME USERS: Change your password upon first logging into SMIS. Click [here](#) to change your password.

For additional informations or questions about SMIS please contact Michael Thomas at (202) 493-4292.

An Information Page like this will appear



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: Home : Mishap : Hazard : Inspection : Report : Forms : Links : Support

The SMIS information page provides access to areas of general information common to Occupational Safety and Health management. These include the Home, Mishap, Hazard, Inspection, Report, Forms, Links, and Support screens. The Mishap section allows the user to Add, Modify, Delete and View mishaps. The Hazard section allows the user to Add, Modify, Delete and View hazards. The Inspection allows users to Add, Modify, Delete and View inspections. The Reports section allows users to retrieve a Cost Report, OSHA 300 Log, CA Customizable Query, Illness and Injury Cost and Trends, and Federal Worker initiative information. The section allows downloading of the CA-1, CA-2, CA-6, CA-16 FAA Form 3900-6 Mishap Report, and the OSHA 300 Log Forms. The Links section provides easy access to the AEE-200 website, Federal Employee Initiative website, Hazard Investigation information, an Inspection Checklist, an Inspection policy, the NIOSH Website, a OSH Management Evaluation guide, the OSHA website, Safety Awareness for non-ATS LOBs, and the SMIS (Feedback) Evaluation form. The Support section links to the Location ID Table, the Cost Center Code Policy and Table, the SMIS Input Guide, and the SMIS output Guide (for an overview of SMIS).

ATTENTION ALL USERS: First time users can find information on how to use the system under Support tab. Current versions of Adobe Acrobat (4.0 and above) and Microsoft Excel (2000) must be installed correctly on your system to fully utilize all features of SMIS. Please contact your computer system support personnel if you experience difficulty configuring the software.

Software viewer may be downloaded at the link below. To fully use SMIS report capability Microsoft Excel (2000) full version must be installed, the Microsoft Excel viewer is intended to be a temporary solution.

For additional informations or questions about SMIS please contact Michael Thomas at (202) 493-4292 or Michael.Thomas@faa.gov.

To enter a mishap, go to the “Mishap” tab and click on “Add 3900-6”



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: Home : **Mishap** : Hazard : Inspection : Report : Forms : Links : Support

Click Add 3900-6

Add 3900-6
Modify 3900-6
Delete 3900-6
View 3900-6

The SMIS information page provides access to areas of Health management. These include the Home, Mishap screens. The Mishap section allows the user to Add, Modify, Delete and View hazards. The Inspection section allows users to retrieve, add, modify, delete and view inspections. The Reports section allows users to retrieve, add, modify, delete and view reports. The Forms section allows users to add, modify, delete and view forms. The Links section provides easy access to the AEE-200 website, Federal Employee Initiative website, Hazard Investigation information, an Inspection Checklist, an Inspection policy, the NIOSH Website, a OSH Management Evaluation guide, the OSHA website, Safety Awareness for non-ATS LOBs, and the SMIS (Feedback) Evaluation form. The Support section links to the Location ID Table, the Cost Center Code Policy and Table, the SMIS Input Guide, and the SMIS output Guide (for an overview of SMIS).

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Enter data in easy fill website!

I. Incident Description				
1. Incident Type <i>(Check all apply)</i>				
<input checked="" type="checkbox"/> Injury <input type="checkbox"/> Illness <input type="checkbox"/> Property Damage <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> First Aid <input type="checkbox"/> Near Miss <input type="checkbox"/> Other <input type="text"/>				
2. Incident Description				
<div></div>				
3. Date of Incident <i>(e.g. mm/dd/yyyy)</i>	4. Day of Week	5. Time of Incident	6. Shift	7. OSHA Recordable
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8. CA-1 Submitted	9. CA-2 Submitted	10. Region of Incident	11. WCIS Case Number <i>(if known)</i>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
12. Facility Type	13. Location ID <i>(of incident)</i>	14. General Location		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
15. Specific Location	16. On Premises	17. Mishap Category		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
18. Date Management Notified of Incident <i>(if different from date of incident)</i>				
<input type="text"/>				

Note: Mandatory fields are highlighted.

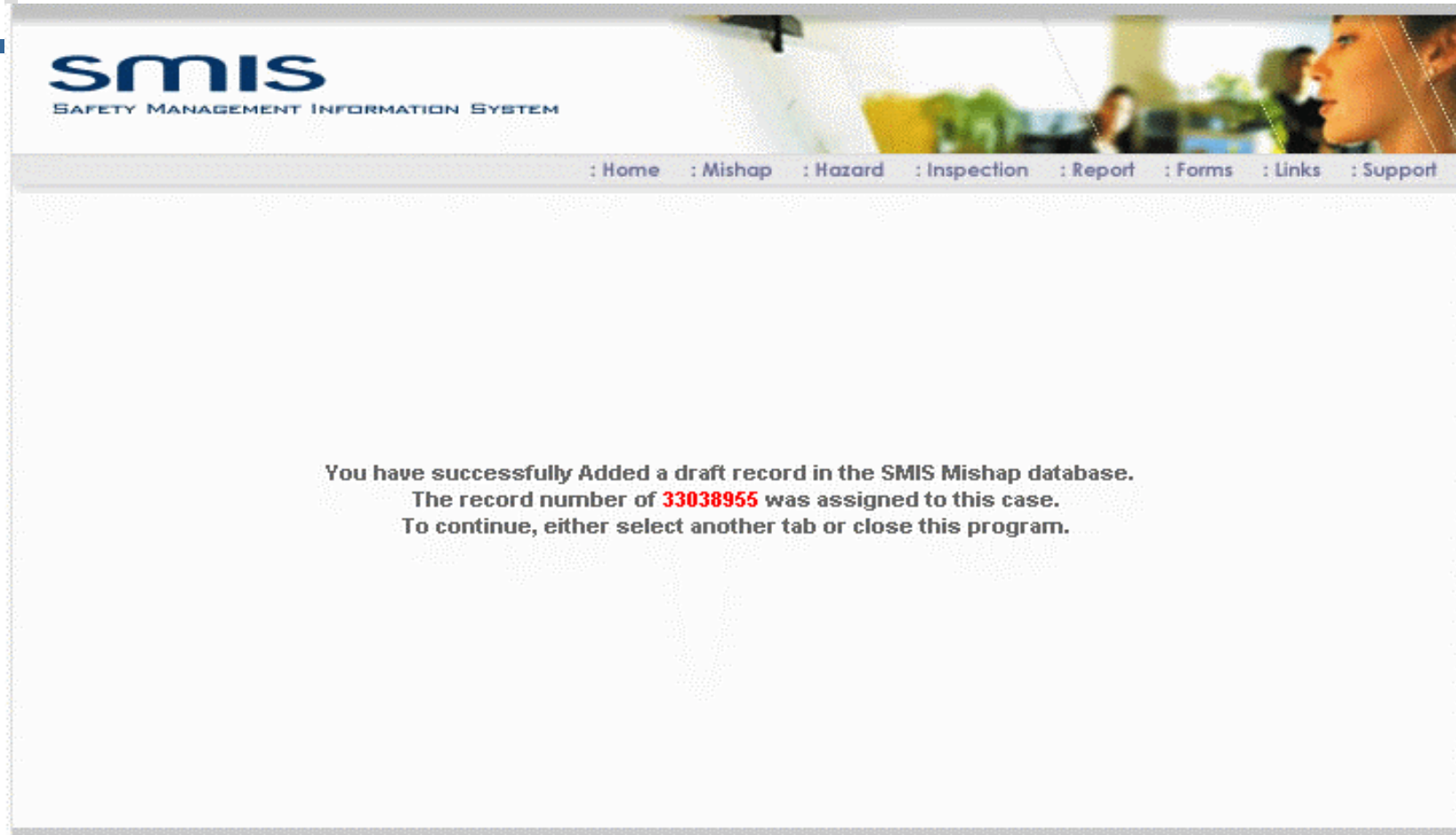
“Submit Final report

VI. Submitter Information	
74. Mishap Report Prepared By (If not by Supervisor) First <input type="text"/> MI <input type="text"/> Last <input type="text"/>	75. Job Series Number <input type="text"/>
76. Job Title <input type="text"/>	77. Routing Number (e.g. AEA-XXX) <input type="text"/>
78. Telephone Number (e.g. xxx-xxx-xxxx) <input type="text"/>	79. Date of Report (e.g. mm/dd/yyyy) <input type="text"/>

Use “Save Draft” if you intend to come back to complete the form later.

The “Add Attachment” allows picture, audio, video, acrobat and word file attachments.

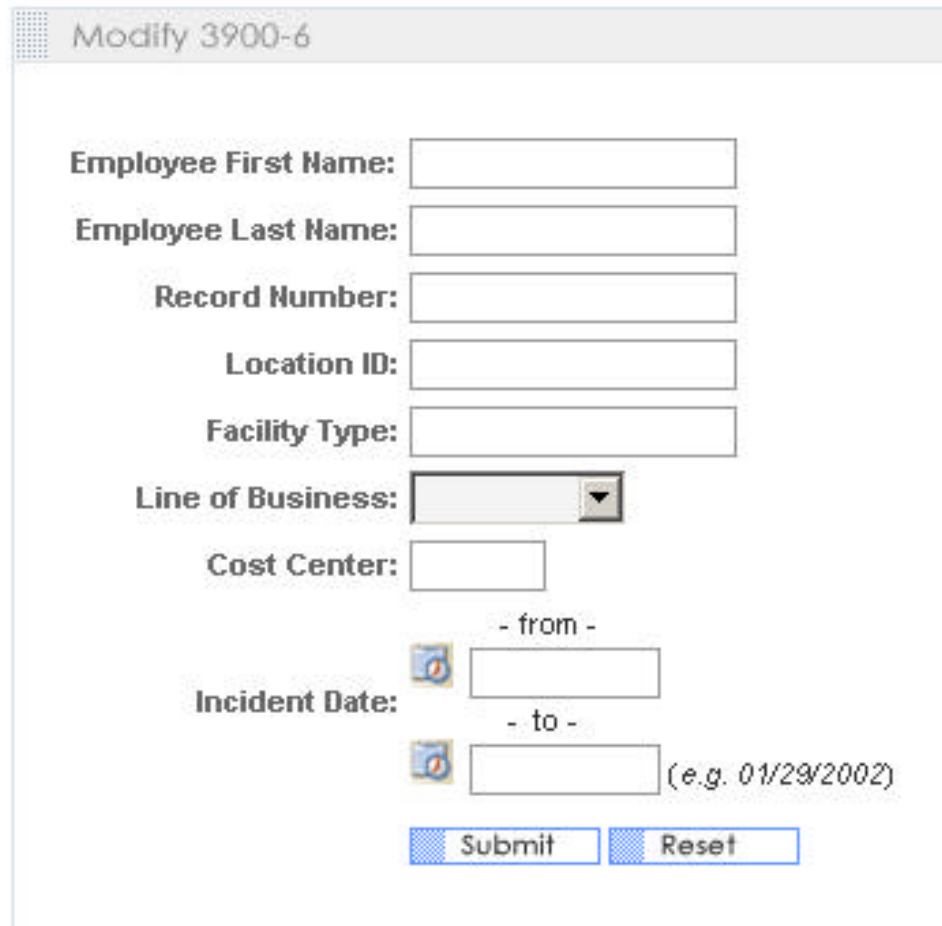
When the report is successfully submitted, you will get this message






NOTE: Please do not use the back arrow at this point!!!

To modify or view a 3900-6:

- ◆ Click on Mishap
- ◆ Click on Modify Mishap to make changes to it
- ◆ Click on View Mishap to just view it
- ◆ Enter the person's name, incident date and/or other selection information to locate the record.



The screenshot shows a web form titled "Modify 3900-6". The form contains the following fields and controls:

- Employee First Name:
- Employee Last Name:
- Record Number:
- Location ID:
- Facility Type:
- Line of Business: 
- Cost Center:
- Incident Date:  - from - - to -  (e.g. 01/29/2002)
- Submit:
- Reset:

SMIS REPORTS

➤ Cost Report

- ◆ Provides estimated cost data and totals for individual cases selected by region, LOB, or division.

➤ OSHA 300 Log

- ◆ Provides the OSHA log for either a facility or an entire region.

➤ CA & 3900-6 Customizable Queries

- ◆ Provides information from the CA1, CA2, CA6 and 3900-6 forms. Data given is based on the form fields selected by the user.

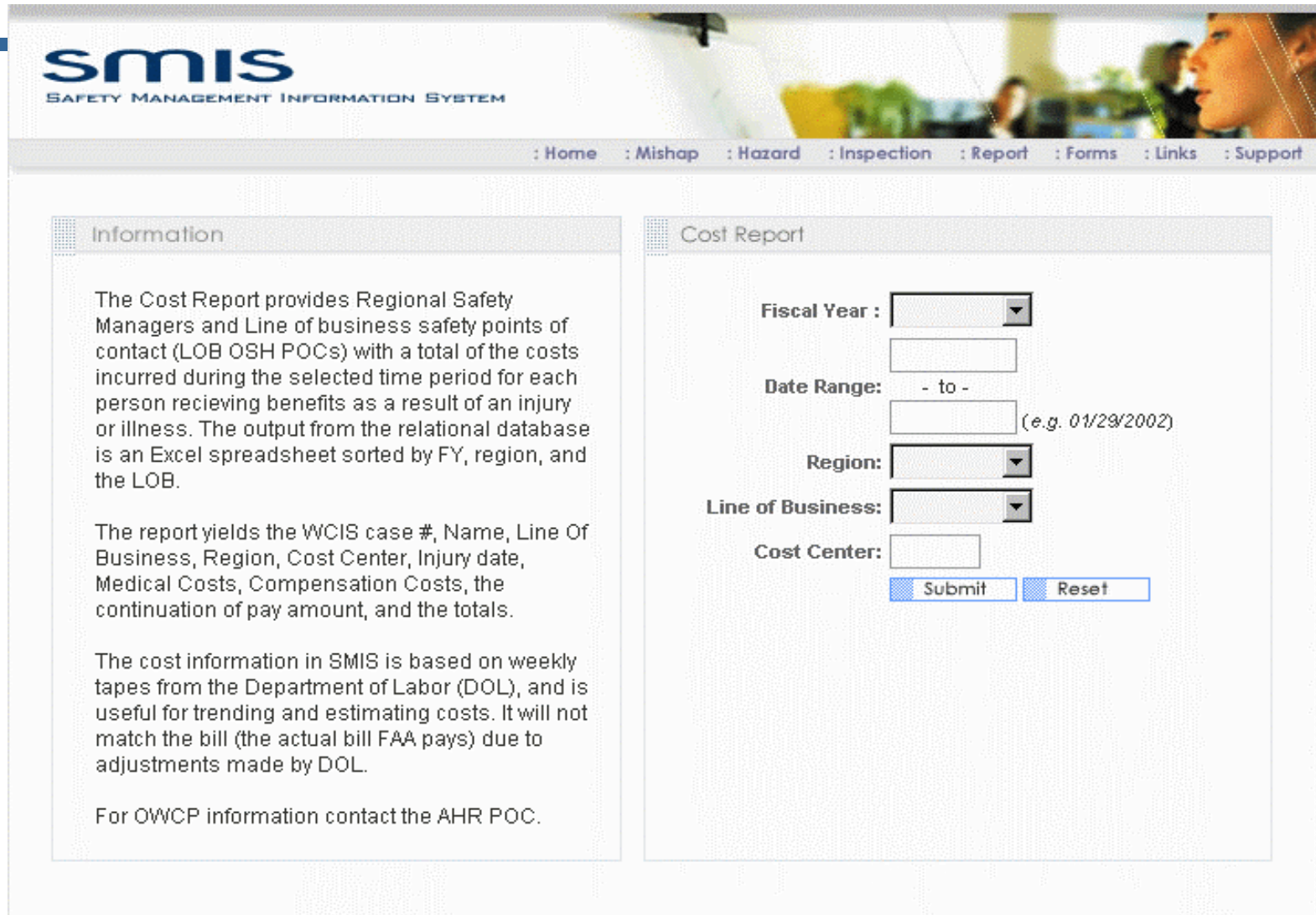
➤ Injury & Illness Cost & Trends

- ◆ Provides a variety of cost data and trending information.

➤ Federal Worker Initiative

- ◆ Provides the progress of LOB's or regions for the Federal Worker Initiative Program. Also provides data required in the annual report to OSHA.

The Cost Report Selection Screen



The screenshot displays the SMIS (Safety Management Information System) web interface. At the top, the SMIS logo is followed by the text "SAFETY MANAGEMENT INFORMATION SYSTEM". A navigation bar contains links: Home, Mishap, Hazard, Inspection, Report, Forms, Links, and Support. The main content area is divided into two panels. The left panel, titled "Information", contains three paragraphs of text explaining the Cost Report's purpose, the data it yields, and its source. The right panel, titled "Cost Report", contains a form with fields for Fiscal Year, Date Range, Region, Line of Business, and Cost Center, along with Submit and Reset buttons.

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[: Home](#) [: Mishap](#) [: Hazard](#) [: Inspection](#) [: Report](#) [: Forms](#) [: Links](#) [: Support](#)

Information

The Cost Report provides Regional Safety Managers and Line of business safety points of contact (LOB OSH POCs) with a total of the costs incurred during the selected time period for each person receiving benefits as a result of an injury or illness. The output from the relational database is an Excel spreadsheet sorted by FY, region, and the LOB.

The report yields the WCIS case #, Name, Line Of Business, Region, Cost Center, Injury date, Medical Costs, Compensation Costs, the continuation of pay amount, and the totals.

The cost information in SMIS is based on weekly tapes from the Department of Labor (DOL), and is useful for trending and estimating costs. It will not match the bill (the actual bill FAA pays) due to adjustments made by DOL.

For OWCP information contact the AHR POC.

Cost Report

Fiscal Year :

Date Range: - to - (e.g. 01/29/2002)

Region:

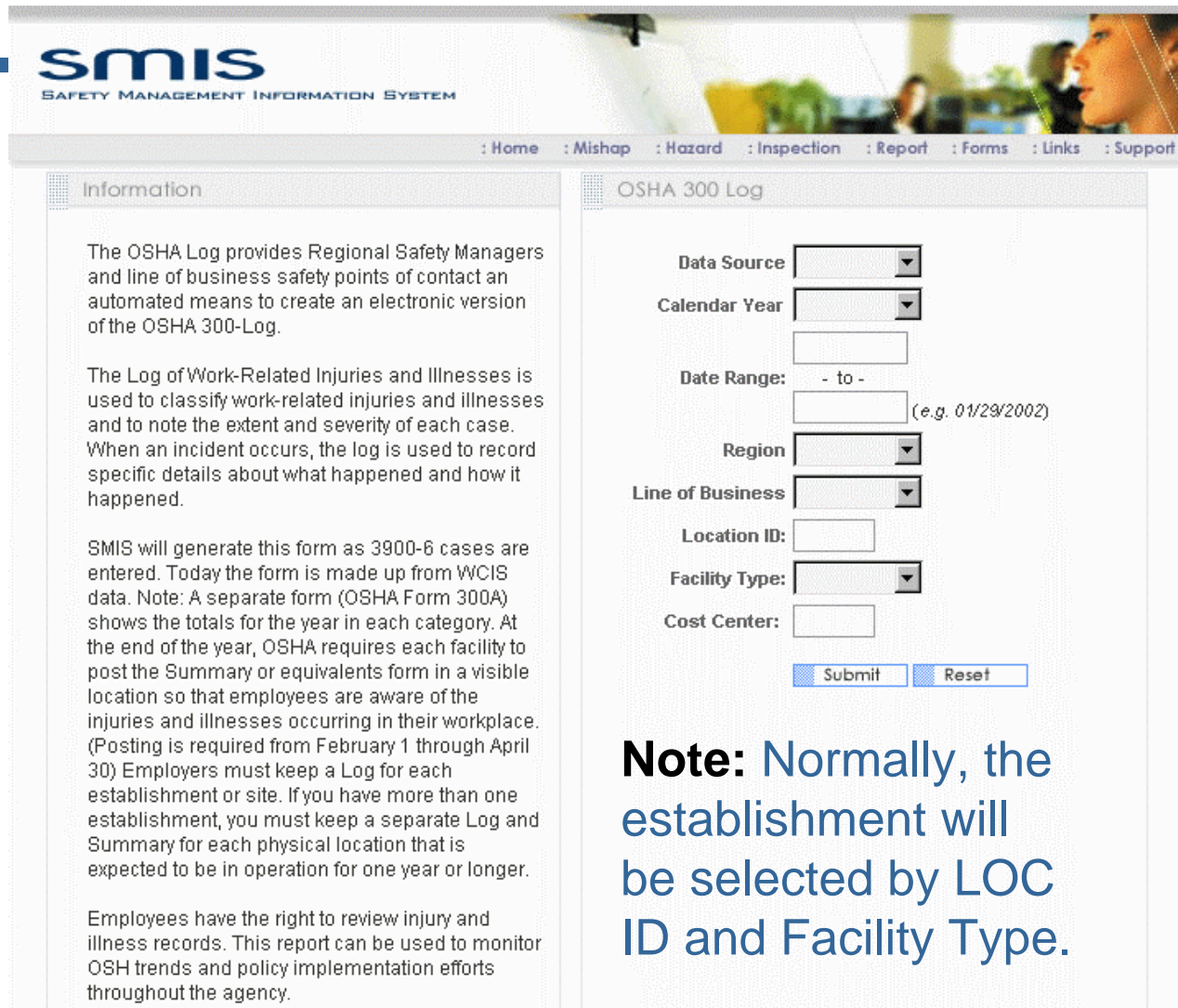
Line of Business:

Cost Center:

The Cost Report looks like this.

Cost Report for SO Region and ATS Line of Business								
Report for Fiscal Year 2002 created on 6/24/2003								
<p><i>*Note: COP Costs are the best available estimate for the time period selected.</i></p> <p><i>The cost information in SMIS is based on weekly tapes from the Department of Labor, and is useful for trending and estimating costs. It will not match the chargeback bill (the actual bill FAA pays) due to adjustments made by DOL.</i></p>								
Line of Business	Region	Cost Center	AT or AF	Date of Injury	Medical Costs	Compensation Costs	Continuation of Pay	Totals
				NOTE: Ask questions when \$0 in the Medical Cost field.				
ATS	SO	DETAILS BLOCKED	AT	03/23/1970	\$0.00	\$36,164.57	\$0.00	\$36,164.57
ATS	SO		AT	02/23/1993	\$1,034.43	\$19,232.79	\$0.00	\$20,267.22
ATS	SO		AT	10/01/1975	\$0.00	\$46,274.96	\$0.00	\$46,274.96
ATS	SO		AT	09/17/1973	\$712.00	\$25,487.54	\$0.00	\$26,199.54
ATS	SO		AT	08/08/1985	\$10,077.70	\$0.00	\$0.00	\$10,077.70
ATS	SO		AT	12/05/1974	\$360.81	\$45,210.13	\$0.00	\$45,570.94
ATS	SO		AT	02/01/1973	\$3,467.49	\$54,910.18	\$0.00	\$58,377.67
ATS	SO		AT	09/28/1974	\$3,338.77	\$59,798.18	\$0.00	\$63,136.95
ATS	SO		AT	01/07/1973	\$2,100.55	\$55,397.36	\$0.00	\$57,497.91
ATS	SO		AT	03/08/1973	\$0.00	\$52,763.86	\$0.00	\$52,763.86
ATS	SO		AT	07/30/1981	\$0.00	\$35,764.94	\$0.00	\$35,764.94
ATS	SO		AT	03/31/1976	\$2,026.23	\$50,534.07	\$0.00	\$52,560.30
ATS	SO		AT	01/01/1971	\$0.00	\$35,437.42	\$0.00	\$35,437.42
					\$1,406,857.00	\$21,495,663.26	\$311,678.54	\$23,214,198.80
Total Number of Cases								712

The OSHA Log Selection Screen



The screenshot displays the SMIS (Safety Management Information System) interface. At the top, the SMIS logo is visible, followed by a navigation bar with links: Home, Mishap, Hazard, Inspection, Report, Forms, Links, and Support. The main content area is divided into two columns. The left column, titled 'Information', contains three paragraphs explaining the OSHA Log's purpose, its use for recording incidents, and the requirements for posting and maintaining the log. The right column, titled 'OSHA 300 Log', contains a form with several fields: 'Data Source' (dropdown), 'Calendar Year' (dropdown), 'Date Range' (text input with a date example '01/29/2002'), 'Region' (dropdown), 'Line of Business' (dropdown), 'Location ID' (text input), 'Facility Type' (dropdown), and 'Cost Center' (text input). At the bottom of the form are 'Submit' and 'Reset' buttons.

Information

The OSHA Log provides Regional Safety Managers and line of business safety points of contact an automated means to create an electronic version of the OSHA 300-Log.

The Log of Work-Related Injuries and Illnesses is used to classify work-related injuries and illnesses and to note the extent and severity of each case. When an incident occurs, the log is used to record specific details about what happened and how it happened.

SMIS will generate this form as 3900-6 cases are entered. Today the form is made up from WCIS data. Note: A separate form (OSHA Form 300A) shows the totals for the year in each category. At the end of the year, OSHA requires each facility to post the Summary or equivalents form in a visible location so that employees are aware of the injuries and illnesses occurring in their workplace. (Posting is required from February 1 through April 30) Employers must keep a Log for each establishment or site. If you have more than one establishment, you must keep a separate Log and Summary for each physical location that is expected to be in operation for one year or longer.

Employees have the right to review injury and illness records. This report can be used to monitor OSH trends and policy implementation efforts throughout the agency.

OSHA 300 Log

Data Source:

Calendar Year:

Date Range: - to - (e.g. 01/29/2002)

Region:

Line of Business:

Location ID:

Facility Type:

Cost Center:

Note: Normally, the establishment will be selected by LOC ID and Facility Type.

WHAT DO YOU GET?

➤ OSHA 300 Log

- 3900-6 reports submitted into SMIS are automatically entered into the 300 Log.
- The Log can be retrieved from either WCIS or 3900-6 data. However, the WCIS data will not populate all fields of the Log.

➤ OSHA 300A Summary

- Provides the summary for posting Feb 1 –Apr 30.
(Can be maintained from a remote location)

The OSHA 300 Log looks like this

OSHA's Form 300 Log of Work-Related Injuries and Illnesses

to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Occup

You must record information about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an injury and illness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.


Establishment name _____

City _____

Identify the person				Describe the case		Classify the case					
(A) Case No.	(B) Employee's Name	(C) Job Title (e.g., Welder)	(D) Date of injury or onset of illness (mo./day)	(E) Where the event occurred (e.g. Loading dock north end)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g. Second degree burns on right forearm from acetylene torch)	Using these categories, check ONLY the most serious result for each case:				Enter the number of days the injured or ill worker was:	
						Death	Days away from work	Remained at work		On job transfer or restriction (days)	Away from work (days)
								Job transfer or restriction	Other recordable cases		
						(G)	(H)	(I)	(J)	(K)	(L)
	Ellen Smith	MAINTENANCE MECHA	2/7/2001		HANDLING FURNITURE/OFFICE EQUIP Back sprain						
	John Doe	ELECTRICAL ENGINEE	3/5/2001		MACHINERY Both eyes						
	Jane Doe	AIR TRAFFIC CONTRO	5/16/2001		CAUSE UNKNOWN Single leg						

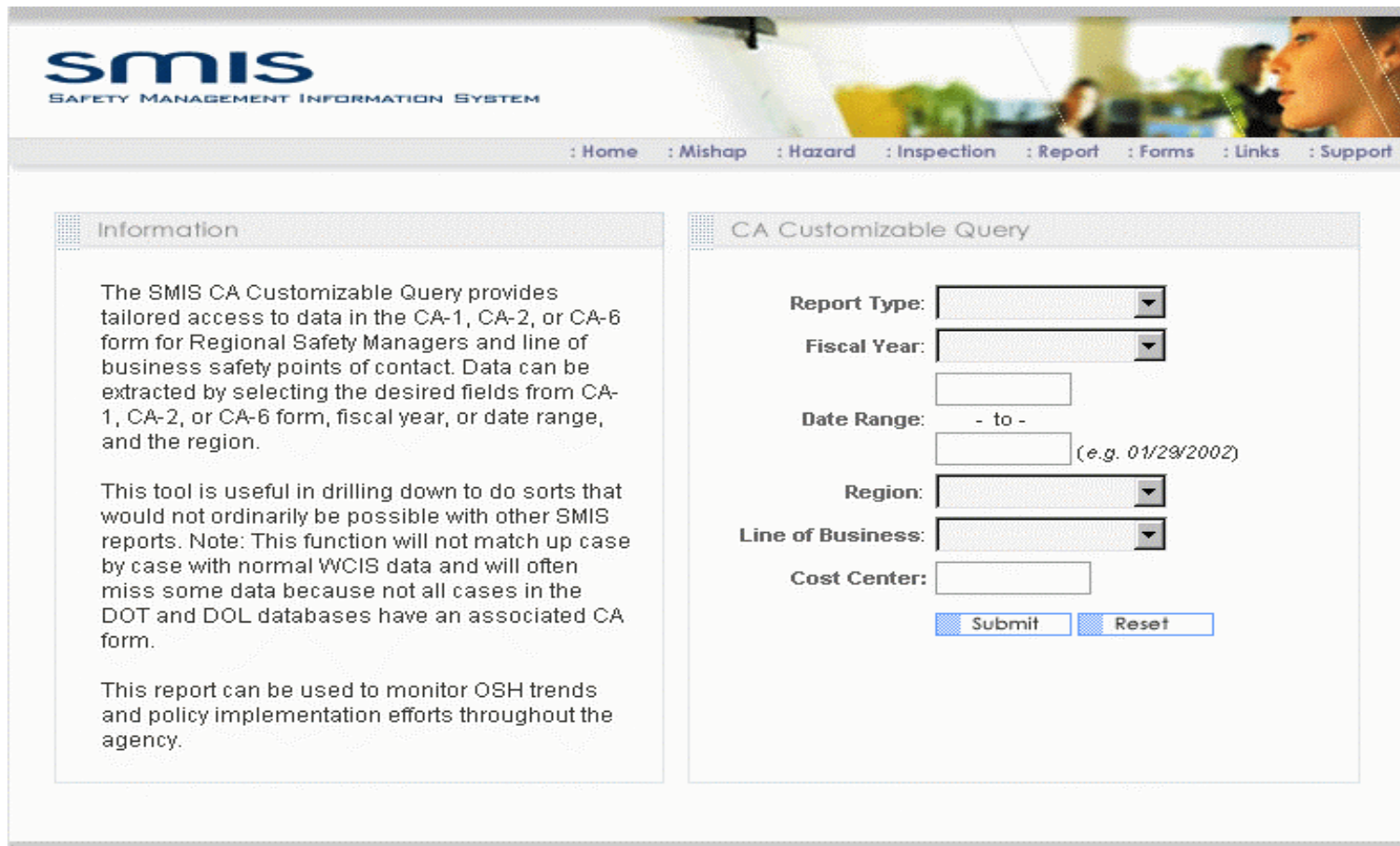
Note: All fields will be filled automatically if you select 3900-6 as the data source. If you select the WCIS data (available to safety professionals only), only sections “a” through “f” will be filled in and you will have to manually enter lost and restricted work days on your log.

The OSHA 300A Summary looks like this

OSHA's Form 300A				Year 2002																																	
Summary of Work-Related Injuries and Illnesses				U.S. Department of Labor Occupational Safety and Health Administration																																	
<small>All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are below, making sure you've added the entries from every page of the log. If you had no cases write "0."</small>				<small>Form approved OMB no. 1218-0</small>																																	
<small>Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these</small>																																					
Number of Cases																																					
Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases																																		
0	2	0	4																																		
(G)	(H)	(I)	(J)																																		
Number of Days																																					
Total number of days of job transfer or restriction	Total number of days away from work																																				
7	176																																				
(K)	(L)																																				
Injury and Illness Types																																					
Total number of... (M)		(4) Poisoning	0																																		
(1) Injury	6	(5) All other illnesses	0																																		
(2) Skin Disorder	0																																				
(3) Respiratory Condition	0																																				
<table border="1"> <tr> <td colspan="2">Establishment information</td> </tr> <tr> <td>Your establishment name</td> <td></td> </tr> <tr> <td>Street</td> <td></td> </tr> <tr> <td>City</td> <td>State Zip</td> </tr> <tr> <td colspan="2">Industry description (e.g., Manufacture of motor truck trailers)</td> </tr> <tr> <td colspan="2">Standard Industrial Classification (SIC), if known (e.g., SIC 3715)</td> </tr> <tr> <td colspan="2"></td> </tr> <tr> <td colspan="2">Employment information</td> </tr> <tr> <td>Annual average number of employees</td> <td></td> </tr> <tr> <td>Total hours worked by all employees last year</td> <td></td> </tr> <tr> <td colspan="2">Sign here</td> </tr> <tr> <td colspan="2">Knowingly falsifying this document may result in a fine.</td> </tr> <tr> <td colspan="2">I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.</td> </tr> <tr> <td>Company executive</td> <td>Title</td> </tr> <tr> <td>Phone</td> <td>Date</td> </tr> </table>								Establishment information		Your establishment name		Street		City	State Zip	Industry description (e.g., Manufacture of motor truck trailers)		Standard Industrial Classification (SIC), if known (e.g., SIC 3715)				Employment information		Annual average number of employees		Total hours worked by all employees last year		Sign here		Knowingly falsifying this document may result in a fine.		I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.		Company executive	Title	Phone	Date
Establishment information																																					
Your establishment name																																					
Street																																					
City	State Zip																																				
Industry description (e.g., Manufacture of motor truck trailers)																																					
Standard Industrial Classification (SIC), if known (e.g., SIC 3715)																																					
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Total hours worked by all employees last year																																					
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Knowingly falsifying this document may result in a fine.																																					
I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.																																					
Company executive	Title																																				
Phone	Date																																				
Post this Summary page from February 1 to April 30 of the year following the year covered by the form																																					

Note: This form is required to be posted in the establishment from February 1 through April 30 of each year.

The CA Selection Screen



The screenshot displays the SMIS (Safety Management Information System) interface. At the top, the SMIS logo is followed by the text "SAFETY MANAGEMENT INFORMATION SYSTEM". A navigation bar contains links: Home, Mishap, Hazard, Inspection, Report, Forms, Links, and Support. The main content area is divided into two panels. The left panel, titled "Information", contains three paragraphs of text explaining the CA Customizable Query tool. The right panel, titled "CA Customizable Query", contains a form with several input fields and buttons.

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SAFETY MANAGEMENT INFORMATION SYSTEM

[: Home](#) [: Mishap](#) [: Hazard](#) [: Inspection](#) [: Report](#) [: Forms](#) [: Links](#) [: Support](#)

Information

The SMIS CA Customizable Query provides tailored access to data in the CA-1, CA-2, or CA-6 form for Regional Safety Managers and line of business safety points of contact. Data can be extracted by selecting the desired fields from CA-1, CA-2, or CA-6 form, fiscal year, or date range, and the region.

This tool is useful in drilling down to do sorts that would not ordinarily be possible with other SMIS reports. Note: This function will not match up case by case with normal WCIS data and will often miss some data because not all cases in the DOT and DOL databases have an associated CA form.

This report can be used to monitor OSH trends and policy implementation efforts throughout the agency.

CA Customizable Query

Report Type:

Fiscal Year:


Date Range: - to - (e.g. 01/29/2002)

Region:

Line of Business:

Cost Center:

The Drill Down Selection


SAFETY MANAGEMENT INFORMATION SYSTEM

[: Home](#) [: Mishap](#) [: Hazard](#) [: Inspection](#) [: Report](#) [: Forms](#) [: Links](#) [: Support](#)

☐ Click here to select all fields or select any assortment of individual fields below

Case

<input type="checkbox"/> WCIS Case Number	<input type="checkbox"/> Date of Injury	<input type="checkbox"/> Date of notice	<input type="checkbox"/> Injury source code
<input type="checkbox"/> Nature of injury code	<input type="checkbox"/> Injury type code	<input type="checkbox"/> Cause of injury	<input type="checkbox"/> Nature of injury description
<input type="checkbox"/> Anatomical location code	<input type="checkbox"/> Worked Sunday	<input type="checkbox"/> Worked Monday	<input type="checkbox"/> Worked Tuesday
<input type="checkbox"/> Worked Wednesday	<input type="checkbox"/> Worked Thursday	<input type="checkbox"/> Worked Friday	<input type="checkbox"/> Worked Saturday
<input type="checkbox"/> Controvert explanation	<input type="checkbox"/> Filing Code	<input type="checkbox"/> Cause of Injury Code	

Accountability

<input type="checkbox"/> Place of Injury	<input type="checkbox"/> Place of Injury zip	<input type="checkbox"/> Region code	<input type="checkbox"/> AT or AF
<input type="checkbox"/> Duty station title	<input type="checkbox"/> Line of Business	<input type="checkbox"/> Cost Center	

Person:

<input type="checkbox"/> Last name	<input type="checkbox"/> First name	<input type="checkbox"/> Middle name	<input type="checkbox"/> Birth date
<input type="checkbox"/> Grade	<input type="checkbox"/> Occupation Code	<input type="checkbox"/> Gender	<input type="checkbox"/> Position Title
<input type="checkbox"/> Name Suffix	<input type="checkbox"/> SSN		

Follow-up

<input type="checkbox"/> Supervisors's last name	<input type="checkbox"/> Supervisor Controvert	<input type="checkbox"/> Supervisor's phone	<input type="checkbox"/> Third party caused
<input type="checkbox"/> Misconduct explanation	<input type="checkbox"/> Due to misconduct	<input type="checkbox"/> Witness statement	<input type="checkbox"/> Supervisors' exception statement

The CA or 3900-6 Output Screen

C15		=	Tone into right ear caused pain and some ringing after the 3rd event.						
	A	B	C	D	E	F	G	H	I
1	Selected CA-1 Report for ASO Region, ATS Line of Business, 10/01/2001 - 09/30/2002								
2	Date Created	6/24/03							
3	DATE OF INJUR	CONTROVERT	E NATURE OF INJURY	PLACE OF INJURY	REGION COD	ADM LOB	COST_CENTER	/ISOR	CONTROVERT
4	10/1/2001		Traumatic Stress		SO	ATS		N	
5	10/1/2001		Metal Trauma		SO	ATS		N	
6	10/4/2001		Left ear, loud tone.		SO	ATS		N	
7	10/6/2001		Neck sore, shoulders so		SO	ATS		N	
8	10/6/2001		Bruised L Shoulder, Con		SO	ATS		N	
9	10/2/2001		Both ears medium sharp		SO	ATS		N	
10	10/7/2001		High pitched tones in rig		SO	ATS		N	
11	10/1/2001		Neck and back area bet		SO	ATS		N	
12	10/6/2001		I landed on my left knee		SO	ATS		N	
13	10/9/2001		Tone if left ear - high pitc		SO	ATS		N	
14	10/15/2001		Ringing and sharp temp		SO	ATS		N	
15	10/9/2001		Tone into right ear cause		SO	ATS		N	
16	10/17/2001		Bruised right knee and ri		SO	ATS		N	
17	10/21/2001		Strained lower back.		SO	ATS		N	
18	10/2/2001		Ankle sprain		SO	ATS		N	
19	10/24/2001		Trauma		SO	ATS		N	
20	10/24/2001		Trauma		SO	ATS		N	
21	10/18/2001		Dizziness, lightheaded a		SO	ATS		N	
22	10/18/2001		left shoulder and arm		SO	ATS		N	
23	10/23/2001		Pulled muscle or tendon		SO	ATS		N	
24	10/3/2001		The lower part of the bac		SO	ATS		N	
25	10/22/2001		Loud tone in war while w		SO	ATS		N	
26	10/22/2001		Jarred Back		SO	ATS		N	
27	10/8/2001		Nausea occurring on pos		SO	ATS		N	
28	10/13/2001		Lungs		SO	ATS		N	
29	10/16/2001		Left leg hamstring feels l		SO	ATS		N	
30	10/16/2001		Left knee sore at knee a		SO	ATS		N	
31	10/29/2001		Ringing in my ear (Right		SO	ATS		N	

Blocked details

Blocked details

INJURY & ILLNESS COST & TRENDS REPORT

- Provides cost and trending information
- Reports providing cost information
 - ◆ Nature of Injury by Region
 - ◆ Nature of injury by LOB
 - ◆ Injury/Illness Type
 - ◆ Job Series
 - ◆ Injury/Illness Type by Job Series
 - ◆ Anatomical Location
 - ◆ Source of Injury
- Reports providing trending information
 - ◆ Injuries by cases or by costs

The Selection Screen

The screenshot shows the SMIS (Safety Management Information System) web interface. At the top, the logo "smis" is displayed with the text "SAFETY MANAGEMENT INFORMATION SYSTEM" below it. A navigation bar contains links: Home, Mishap, Hazard, Inspection, Report, Forms, Links, and Support. The main content area is divided into two panels. The left panel, titled "Information", contains text about the Injury & Illness Cost and Trends Reports, listing available report types and their uses. The right panel, titled "Injury & Illness Cost and Trends", contains a form for selecting report parameters. A dropdown menu is open for the "Report Type" field, showing a list of options. An arrow points from the "Source of Injury" option in the dropdown to the "Source of Injury" text in the list on the right.

smis
SAFETY MANAGEMENT INFORMATION SYSTEM

: Home : Mishap : Hazard : Inspection : Report : Forms : Links : Support

Information

The Injury & Illness Cost and Trends Reports provide Regional Safety Managers and line of business safety points of contact with information on the number of cases and the costs of mishaps. Reports can be downloaded as Excel Spreadsheets and sorted. Available reports include: Nature of Injury by Region, Nature of Injury by LOB, Illness/Injury Type, Job Series, Injury/Illness by Job Series, Anatomical Location, Source of Injury, Top Ten Injury list by Number of Cases, and Top Ten Injury list by Cost.

This report can be used to monitor OSH trends and policy implementation efforts throughout the agency.

Injury & Illness Cost and Trends

Report Type: Nature of Injury by Region

Year Type: Fiscal

Begin Year: 2003 Quarter: 1st

End Year: 2003 Quarter: 4th

Region:

Line of Business:

Cost Center:

Submit Reset

Nature of Injury by Region
Nature of Injury by LOB
Injury/Illness Type
Job Series
Injury Illness Type by Job Series
Anatomical Location
Source of Injury

The Injury/Illness Output screen

Injury/Illness Type / ALL LOB									
Report Date: FY-2002 1st Quarter Thru FY-2003 4th Quarter created on 6/23/2003									
*Note: COP Costs are the best available estimate for the time period selected.									
Year	Region	Injury / Illness Type	Total Cases	% of Total Cases	Medical Costs	Compensation Costs	COP Costs	Total Cost	% of Total Costs
		Stressed by (repeated action)	23	6.87%	\$20,129.46	\$7,167.53	\$42,326.77	\$69,623.76	9.08%
		Lifted, strained by (single action)	18	5.37%	\$46,907.45	\$46,305.38	\$11,188.88	\$104,401.71	13.61%
		Struck against	14	4.18%	\$0.00	\$5,129.51	\$9,258.66	\$14,388.17	1.88%
		Struck by	12	3.58%	\$0.00	\$4,516.87	\$5,995.05	\$10,511.92	1.37%
		Exertion	9	2.69%	\$0.00	\$28,232.03	\$2,534.39	\$30,766.42	4.01%
		Cut by	8	2.39%	\$0.00	\$2,278.62	\$1,095.85	\$3,374.47	0.44%
		Contact	7	2.09%	\$0.00	\$1,611.88	\$6,876.71	\$8,488.59	1.11%
		Bitten by	4	1.19%	\$0.00	\$179.28	\$830.27	\$1,009.55	0.13%
		Traveling in	4	1.19%	\$13,069.34	\$924.27	\$7,835.13	\$21,828.74	2.85%
		Unclassified or insufficient data	4	1.19%	\$0.00	\$2,017.66	\$16.55	\$2,034.21	0.27%
		Struck	3	0.90%	\$0.00	\$7,289.18	\$7,882.61	\$15,171.79	1.98%
		Slip, trip; no fall	3	0.90%	\$0.00	\$239.51	\$1,767.42	\$2,006.93	0.26%
		Contact with (motion of person)	3	0.90%	\$0.00	\$0.00	\$11,626.16	\$11,626.16	1.52%
		No data available	3	0.90%	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
		Fell, different level	2	0.60%	\$0.00	\$496.05	\$0.00	\$496.05	0.06%
		Fell, same level	2	0.60%	\$0.00	\$209.61	\$0.00	\$209.61	0.03%
		Caught on	2	0.60%	\$2,124.86	\$19,742.10	\$4,536.27	\$26,403.23	3.44%
		Contact by (motion of object)	2	0.60%	\$0.00	\$944.96	\$0.00	\$944.96	0.12%
		Stung by	2	0.60%	\$0.00	\$299.03	\$798.47	\$1,097.50	0.14%
		Struck by falling object	1	0.30%	\$0.00	\$1,767.89	\$284.29	\$2,052.18	0.27%
		Caught	1	0.30%	\$0.00	\$0.00	\$352.66	\$352.66	0.05%
		Caught in	1	0.30%	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
		Ingestion	1	0.30%	\$0.00	\$100.00	\$0.00	\$100.00	0.01%
		Punctured, lacerated	1	0.30%	\$0.00	\$744.88	\$293.36	\$1,038.24	0.14%
SO Total			335	100.00%	\$220,776.92	\$266,590.35	\$279,487.86	\$766,855.13	100.00%

Think Prevention = Training, PPE, Engineer hazard out.

FEDERAL WORKER INITIATIVE

- SHARE Initiative
 - ◆ Formerly called Federal Worker 2000
- Provides reports that go into the LOB/Staff Office Annual OSH Reports
- Report types
 - ◆ Total Case Rate
 - ◆ Lost Time Case Rate
 - ◆ Five Year Total and Lost Time Case Rate Summaries

The Selection Screen

smis
SAFETY MANAGEMENT INFORMATION SYSTEM

: Home : Mishap : Hazard : Inspection : Report : Forms : Links : Support

Information

The Federal Worker Initiative Reports provide Regional Safety Managers and line of business safety points of contact a way to easily track progress toward goals in the Federal Worker Initiative. Reports can be downloaded as Excel spreadsheets and sorted. Available reports include: Total Case Rate by line of business, Total Case Rate by Region, Summary of the Total Case Rate for 5 years, Lost time Case Rate, Lost Time Case rate for 5 years, TCR and LTCR Summary by LOB, and the TCR and LTCR Summary by Region. Selection parameters include the report type, year or range of years, region, line of business, and cost center.

This report can be used to monitor OSH trends and policy implementation efforts throughout the agency. Click [here](#) to get additional information of Federal Employee Initiative.

Federal Worker Initiative

Report Type: Total Case Rate (5 Year Summary) ▼
Year Type: Fiscal ▼
Region: ASO ▼
Line Of Business: ATS ▼
Cost Center:

- Total Case Rate (TCR) by LOB
- Total Case Rate (TCR) by Region
- Lost Time Case Rates (LTCR)
- Total Case Rate (5 Year Summary)
- Lost Time Case Rates (5 Year Summary)**
- TCR and LTCR Summary by LOB
- TCR and LTCR Summary by Region

The FWI Output looks like this.

Total Case Rate (5 Year Summary) for the SO Region and the ATS LOB

Report for Fiscal Years 2000 to 2004 created on 6/24/2003

	B	P1	G1	C1	C1/P1	P2	G2	C2	C2/P2	P3	G3	C3	C3/P3	P4	G4	C4	C4/P4	P5	G5	C5	C5/P5
LOB	Base line	2000 Popul ation	2000 Goal	2000 Cases	2000 Rate	2001 Popul ation	2001 Goal	2001 Cases	2001 Rate	2002 Popul ation	2002 Goal	2002 Cases	2002 Rate	2003 Popul ation	2003 Goal	2003 Cases	2003 Rate	2004 Popul ation	2004 Goal	2004 Case s	2004 Rate
SO	3.33%	6467	3.23%	255	3.94%	6570	3.13%	274	4.17%	6535	3.04%	315	4.82%	6451	2.95%	105	1.62%		2.86%	0	
		6467		255		6570		274		6535		315		6451		105		0		0	

* The RATES in Column F, J, N, R & V are determined by dividing the population of the group selected in the dropdown menu by the number of injuries & illnesses.

* The Goals are determined by the rate of the baseline year of 1997. The measurement begins in the year 2000. The Goal rate should be reduced by 3% each year thereafter. If the goal reached 2% then rate do not reduce.

Questions/Problems/Passwords?

- Contact Michael Thomas
 - ◆ 202 493-4292
 - ◆ Michael.Thomas@faa.gov
 - Contact Vicki Hershiser
 - ◆ 202 267-8425
 - ◆ Victoria.Hershiser@faa.gov
 - Call your ROSHM or LOB OSH POC
- User comments and suggestions are welcome.